UNITED STATES DISTRICT COURT

for the

District of Maryland					
CHARMAINE CON	DILLAC)			
Plaintiff(s) V. ALEX M. AZAR II, Secretary, Health & Human Services and HAHN, Commisioner, US Foo	I Dr. STEPHEN M.))) ()))))	il Action No.		
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address) Dr. Stephen M. Hahn U.S. Food and Drug Administration 10903 New Hampshire Ave Silver Spring, MD 20993-0002					
A lawsuit has been filed against you.					
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Morris E. Fischer Morris E. Fischer, LLC 8720 Georgia Ave. Suite 210 Silver Spring, MD 20910					
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.					
			CLERK OF COURT		
Date:		_			
			Signature of Clerk or Deputy Clerk		

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

was re	This summons for (nanceived by me on (date)	ne of individual and title, if any)				
was ic		·				
	☐ I personally served	the summons on the individual	on (date)	; or		
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	, a person of suitable age and discretion who re					
	on (date), and mailed a copy to the individual's last known address; or					
	☐ I served the summons on (name of individual) designated by law to accept service of process on behalf of (name of organization) ,					
		on (date)				
	☐ I returned the summ	☐ I returned the summons unexecuted because				
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty of perjury that this information is true.					
Date:						
			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: